

PAGE	1	OF	1
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) AMERICA'S PROGRESSIVE PROMISE PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00744789 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ➤ <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: flex-end; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y</div> </div>	

Full Name of Payee Solidarity Strategies		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>10 / 23 / 2020</div> </div>	
Mailing Address 247 16th St. SE		Amount <div> <div>54000.00</div> </div>	
City Washington	State DC	Zip Code 20003	Transaction ID : SE.4243
Purpose of Expenditure Telephone calls	Category/ Type	004	Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>10 / 23 / 2020</div> </div>
Name of Federal Candidate BULLOCK, STEVE, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate	District: _____ State: <u>MT</u>
Calendar Year-To-Date Per Election for Office Sought	<div>54000.00</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Solidarity Strategies		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>10 / 23 / 2020</div> </div>	
Mailing Address 247 16th St. SE		Amount <div> <div>81000.00</div> </div>	
City	State	Zip Code	Transaction ID : SE.4244 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>10 / 23 / 2020</div> </div>
Washington	DC	20003	
Purpose of Expenditure Telephone calls		Category/ Type	004
Name of Federal Candidate GIDEON, SARA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>ME</u>
Calendar Year-To-Date Per Election for Office Sought		<div> <div>81000.00</div> </div>	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	135000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	135000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

[Electronically Filed]

Signature

Date _____